

Chapter 2

Security Assistance Training Program Medical and Dental Requirements and Policies

This chapter contains clarification of the medical and dental requirements for International Military Students (IMS) and their authorized family members. Also included is information on communicable disease, immunizations, medical screenings, records, reporting and requirement for health care coverage.

A. Prerequisites

1. The medical and dental requirements set forth in paragraphs 10-46a and b of the Joint Security Assistance Training (JSAT) Regulation are considered prerequisites for participation in the Security Assistance Training Program (SATP). Additional medical and dental requirements for special courses, i.e. flight, ranger, deep sea diving, patient care, etc. are provided in course prerequisites. The home country is responsible for providing students in good physical and mental health, which meet the prerequisites of the program and comply with the laws and federal regulations of the United States. Cost associated with corrective medical and dental procedures to qualify the student for training will be borne by the home country.
2. Title 8 USC, Aliens and Nationality (INA), as amended, Section 1182, Inadmissible Aliens, states that any alien who is determined (in accordance with regulation prescribed by the Secretary of Health and Human Services) to have the following conditions is ineligible to receive a visa and ineligible to be admitted to the United States.
 - a. A communicable disease of public health significance,
 - b. To have a physical or mental disorder and behavior associated with the disorder that may pose, or has posed, a threat to property, safety, or welfare of the alien or others, or
 - c. To have a physical or mental disorder and a history of behavior associated with the disorder, which behavior is likely to recur or to lead to other harmful behavior, or
 - d. Who is determined to be a drug abuser or addict.
 - e. At the Attorney General's discretion, after consultation with the Secretary of Health and Human Services, individual waivers may be granted under such terms, conditions and controls, if any, as he/she determines, including the giving of a bond.¹² Individual waiver applications are filed on form I-602 with the Center for Disease Control through the servicing consulate. No provisions are made for waivers of the medical examination requirement.

B. Physical Examinations

1. Before an Invitational Travel Order (ITO) can be issued to an IMS, the Security Assistance Office (SAO) must receive a signed statement from a **competent medical and dental authority** stating that the IMS has received a thorough physical examination within the three preceding months. The **medical** statement is also required for family members before they can be authorized on the ITO.³
2. The scope of the examination shall include any laboratory or additional studies that are deemed necessary, either as a result of the physical examination or pertinent information elicited from the alien's medical history, for the examining physician to reach a conclusion about the presence or

¹ 8 USC 1182, subsection (g)

² 8 CFR 212.4

³ Paragraph 10-46b of the JSAT

absences of a physical or mental abnormality, disease, or disability.⁴ No provisions are made for waiver of these requirements with exception of those addressed in paragraph 2h below. Physical examination must include, but not be limited to:

- a. A medical history.
 - b. A mental examination.
 - c. A chest X-ray except as provided for in paragraph 2h.
 - d. Serologic testing for **syphilis** and for serologic evidence of **Human Immunodeficiency Virus (HIV)** except as provided for in paragraph 2h.
 - e. When chest X-ray shows abnormality sputum smear examination for **Tuberculosis**.
 - f. Other test or studies necessary to identify communicable diseases (see Section C).
 - g. Necessary examination and test to certify that IMS meets any special medical requirements listed in prerequisites of the course IMS is scheduled to attend.
 - h. Exceptions. Neither a chest X-ray examination nor serologic testing for syphilis and HIV shall be required if the alien is under the age of 15. Provided that a tuberculin skin test shall be required if there is evidence of contact with a person known to have tuberculosis or other reason to suspect tuberculosis, and a chest X-ray examination shall be required in the event of a positive tuberculin reaction, and serologic testing where there is reason to suspect infection with **syphilis** or **HIV**.
3. Dental examination should certify that the IMS meets any dental requirements for the course of instruction and has no tooth or bone decay, oral disease or infection that will require treatment during training.
 4. The certification required in paragraphs B1, medical certification, and B3, dental certification, above would also state that the individual has received the complete immunization prescribed by the U.S. Public Health Service (PHS), as approved by the World Health Organization (WHO) and is free of communicable disease. Certification from any source other than a competent medical and dental authority is not acceptable.
 5. If a medical or dental defect exists that will not prevent successfully participation in the scheduled course of instruction the Invitational Travel Order (ITO) must be annotated in item 14 Special Conditions.⁵ Failure to do so may lead to an adverse situation for the IMS.
 6. Information on special physical examination as prescribed in the course prerequisites can be found in the course prerequisites. All physical examination documents accompanying the student as a condition for participation in training must be in English.
 7. If the IMS or family members have an existing medical or dental condition that does not prevent the IMS from training or the family member from traveling, that condition must be listed on the ITO Block 14, Special Conditions/Remarks.

C. Communicable Diseases

1. There are many U.S. Codes, federal regulations and policies^{6,7,8} that prevent the introduction and transmission of diseases into the United States. IMS and their family members must be in compliance with the requirements of these United States Codes, Code of Federal Regulations and policies. Individuals arriving in the United States are subject to the restrictions and penalties set forth in these codes and regulations. Although these diseases may not deny the IMS from training, it can deny him/her from entering the United States. Applicants must be free of the below listed diseases.

⁴ 42 CFR 34, Medical Examination of Aliens

⁵ Paragraph 10-46a of the JSAT

⁶ 8 USC 1182 Inadmissible Aliens

⁷ 42 CFR 34 Medical Examination of Aliens

⁸ Department of State 9 Foreign Affairs Manual 40.11 N6 INA 212(A)(1)a(i), Communicable Disease

Presence of any of these diseases would prevent medical certification for an IMS or family member, and would render them ineligible to obtain a Visa or enter the United States.

- a. **Chancroid**
 - b. **Cholera or suspected cholera**
 - c. **Gonorrhea**
 - d. **Granuloma Inguinale**
 - e. **Hansen's Disease (leprosy), infectious**
 - f. **Human Immunodeficiency Virus (HIV) Infection**
 - g. **Lymphogranuloma Venereum**
 - h. **Plague**
 - i. **Severe Acute Respiratory Syndrome (SARS)**
 - j. **Suspected viral hemorrhagic fevers (Lassa, Marburg, Ebola, Congo-Crimean, and other not yet isolated or named)**
 - k. **Suspected smallpox**
 - l. **Syphilis, infectious state**
 - m. **Tuberculosis, infectious**
 - n. **Yellow Fever**
2. If the IMS is physically in the United States and is diagnosed with one of the following diseases, they must remain in that geographical location until deemed free of the disease or cleared by the United States Public Health Services Surgeon General for travel⁹. The community health nurse at the local medical facility is required by law to notify the IMS and will inform the IMSO of the interstate requirements. Those diseases are:
- a. **Anthrax**
 - b. **Cholera**
 - c. **Dengue**
 - d. **Infectious encephalitis**
 - e. **Favus**
 - f. **Meningococcus meningitis**
 - g. **Plague**
 - h. **Poliomyelitis**
 - i. **Psittacosis**
 - j. **Relapsing fever**
 - k. **Ringworm of the scalp**
 - l. **Scarlet fever**
 - m. **Smallpox**
 - n. **Streptococcal sore throat**
 - o. **Trachoma**
 - p. **Typhoid Fever**
 - q. **Typhus**
 - r. **Yellow fever**
3. **Hepatitis A, Hepatitis B, Hepatitis C** and **Buruli Ulcer** do not appear in Title 8 USC, Title 21CFR or Title 42 CFR they are communicable diseases and would come under the requirements in paragraph 10-46a of the JSAT.
4. Current listing and information of communicable diseases can be obtained from the World Health Organization [http://www.who.int/home/map ht.html](http://www.who.int/home/map_ht.html) and the U.S. Centers for Disease Control <http://www.cdc.gov/>.

D. Immunizations

⁹ 21 CFR, Food and Drugs, Part 1240, Control of Communicable Diseases, Subpart C, Restrictions of Travel, Sections 1240.40, 1240-50, 1240.54, and 1240-55

1. Immunizations are preventive medicine measures utilized for the control of communicable disease. Most diseases preventable by vaccine are more easily transmitted when people are congregated in close environments, i.e. airplanes, schools, church, public events, etc. As of this writing, IMS are **required** to have a Yellow Fever vaccination if they are coming from or traveling through a yellow fever endemic country. If the IMS is participating in medical training, they are also required to have a Hepatitis B vaccination¹⁰.
2. It is DoD policy that the general recommendations of the PHS, as established by the CDC, shall be followed.¹¹ This policy is implemented in a joint publication, which provides that foreign nationals under Armed Forces sponsorship receive all immunizations required for entry into the U.S., and by local jurisdictions. When returning to their country of origin, foreign nationals receive immunizations required by international health regulations of their country of origin. Both the joint publication and the recommendation for immunizations for children from the CDC can be located in Appendix G. Although the immunizations listed in paragraphs 2b(1) and (2) below are not required for entry into the United States it is highly recommended as good health practice that all individuals receive the immunizations listed.
 - a. A current listing of those countries known to have **Yellow Fever** are found in the CDC Blue Sheet <http://www.cdc.gov/travel/blusheet.htm>. IMS from and traveling through these countries will require the Yellow Fever Immunization.
 - (1) Yellow Fever initial vaccination is valid not less than 10 days or more than 10 years from date of immunization (incubation period 5 days). Yellow Fever revaccination done within 10 years of the first vaccination is valid immediately.
 - (2) Children under 1 year of age are exempt from Yellow Fever vaccinations.
 - (3) Yellow Fever immunization must be done in a WHO approved laboratory.
 - b. Participants in health care training have a significant risk for acquiring or transmitting vaccine preventable diseases. The CDC strongly recommends immunizations as an element of personnel health service for infection control. Students reporting for training should have their Immunization Record. Students reporting without an Immunization Record may be subject to processing through the preventive medicine authority/occupational health clinic for verifying serologically the immune status of the IMS and document tuberculosis status by the Mantoux method. Immunizations required or recommended prior to reporting are:
 - (1) **Hepatitis A**
 - (2) **Hepatitis B**
 - (3) **Measles**
 - (4) **Mumps**
 - (5) **Rubella**
 - (6) **Polio**
 - (7) **Tetanus-Diphtheria**
 - (8) **Varicella (Chickenpox)**
 - (9) **Influenza** during the influenza season extending from October through March is also recommended.
 - (10) In addition to the above recommendations IMS participating in animal care training should be immunized for **Rabies**.
3. All 50 of the United States have laws requiring immunization for entry to school. Authorized family members that will be attending school will need proof of immunizations. Immunization against **diphtheria, measles, poliomyelitis, and rubella** is now required for entry to school. Additionally,

¹⁰ DoD Health Affairs (HA) Policy 97-06

¹¹ Air Force Joint Instruction 48-110, Army Regulation 40-562, BUMEDINST 6230.15, CG COMDTINST M6230.4E), Immunizations and Chemoprophylaxis

most states require immunization for **tetanus, pertussis, and mumps**. Some have added **Hepatitis A and B** and the requirement for a **Mantoux Test** for tuberculosis.

4. All IMS and family members must bring their immunization record (in English) with them. This will ensure that immunizations required for certain training, entry to public schools and return to home country are recorded and will prevent duplication of immunizations. A statement from a physician or the SAO is not acceptable. The WHO immunization record booklet is the vaccination certificate or document accepted and approved by all United Nation member countries. This booklet is available from local health organizations and international airlines.

E. Medical Screenings

1. Paragraph C10.3.4.4 of the Security Assistance Management Manual (SAMM) and 10-39 of the JSAT exempts IMSs from medical examinations and any mandatory urinalysis and blood-screening programs other than those required as a prerequisite of the course. Only those IMS reporting for courses with special physical examination requirements, i.e. flight training, deep sea diving, ranger, special operations, etc. that do not have the required physical will be given physical examination to meet the special requirement. Cost of these examinations to meet the prerequisites of a course will be born by the country. They are not chargeable to the International Military Education and Training Program (IMETP).
2. Under no circumstances should training facilities establish a requirement for all IMS reporting for training to automatically receive a physical examination.
3. Any indication or evidence of alcohol or drug abuse, or a debilitating or communicable disease found in medical screenings as a prerequisite of the course or subsequent to IMS reporting for Sick Call should be reported to the Military Departments (MILDEPs).
4. Procedures provided in paragraphs 10-39a and b of the JSAT dealing with IMS diagnosed with a potentially debilitating illness, communicable disease or have been diagnosed, as HIV positive should be followed.

F. Medical Records and Reporting

1. Medical Records of IMS and their authorized family members should be treated as confidential. Only personnel with a need to know shall have access to the records.
2. When complying with the reporting requirements outlined in the JSAT the individual's privacy must be safeguarded. Reporting should never include the individual's name, only the country IMET year or FMS case designator, and Work Control Number (WCN).
3. Reporting of medical conditions must be based on the diagnosis and prognosis of the servicing medical/dental authority.

G. Health Care Coverage¹²

1. All IMS and family members authorized on the ITO must have health care coverage for the duration of their training. Failure to have health care coverage on IMS will result in IMS being withdrawn from training and returned home. Family members cannot be authorized on the ITO without health care coverage.
2. IMET
 - a. IMS - Health Care Coverage for IMET IMS is provided by the IMETP.

¹² DSCA Policy Memo 02-42

- b. Family Members -The country must pay for health care for IMET family members or IMS must show proof of Medical insurance to SAO prior to family members being authorized on the ITO. The name, address and telephone number of the company providing the Medical insurance will appear in the remark section of the ITO.

3. FMS

a. Non-NATO/PFP

- (1) IMS – The country must pay for health care, have a medical line on the FMS case, or IMS must have Medical insurance for the duration of training.
- (2) Family Members – The country must pay for health care, be covered by a medical line on the FMS case, or IMS must have Medical insurance for the duration of the family member's stay.

b. NATO/PFP

- (1) IMS – The country must pay for health care, have a medical line on the FMS case, or IMS must have Medical insurance for the duration of training for inpatient care in DoD medical facilities and all civilian health care.
- (2) Family Members – The country must pay for health care, be covered by a medical line on the FMS case, or IMS must have Medical insurance for the duration of the family member's stay for inpatient care in DoD and civilian medical facilities. TRICARE Standard covers civilian outpatient care. IMS or country pays the deductible and Copayment.

c. Reciprocal Health Care Agreements – Provides health care at no charge in DoD medical facilities. This is adequate coverage when the training location has DoD outpatient and inpatient medical facilities. However, ITO must state in remark section of the ITO who will pay for care received from civilian medical facilities. Where there are not adequate DoD facilities health care coverage is either:

- (1) the IMETP pay (IMS only),
- (2) country pays,
- (3) a medical line on the FMS case,
- (4) IMS must have Medical insurance for both outpatient and inpatient care or
- (5) When at a location that has a DoD clinic Medical insurance for inpatient care.

d. Pregnant spouses will not be authorized on the ITO unless the country pays, they are covered by a medical line on the FMS case or the training location has a DoD hospital and the spouse is covered by a Reciprocal Health Care Agreement. Following delivery spouse and child can be authorized when IMS shows proof of health care coverage.

e. Family members with pre-existing medical conditions will not be authorized on the ITO unless the country pays for health care or a medical line on a FMS case covers them. If the family members are covered by a Reciprocal Health Care Agreement then they can be authorized on the ITO if the IMS will be a location with DoD outpatient and inpatient facilities.

f. When Medical insurance is the health care coverage minimum requirements are

- (1) Medical benefits of at least \$50,000 per accident or illness (sickness)
- (2) A deductible not to exceed \$500 per accident or illness
- (3) Repatriation of remains in the amount of \$5,000 should a death occur in the U>S> NOTE: This would provide for the preparation and transportation of remains to home country.
- (4) Medical evacuation in the amount of \$10,000 in the event insuree must be returned to his/her home country due to a serious medical condition.

- (5) Insurance must pay benefits to a Department of Defense medical facility if appropriate.
NOTE: Medical insurance can be purchased online. Information on Medical insurance can be found at <http://www.disam.dsca.mil/itm> under Functional, Health Affairs.

Medical Checklist

IMS and Family Members

Chest X-ray¹³

Sputum Smear Examination (if abnormalities

Are noted in the Chest X-ray)

Serological Test¹⁴

(For Syphilis and for serologic evidence of Human Immunodeficiency Virus (HIV)

Other Test or Studies

(To ensure individual is free of Communicable diseases to include)

Anthrax

Buruli Ulcer

Chancroid

Cholera (or suspected cholera)

Dengue

Favus

Gonorrhea

Granuloma Inguinale

Hansen's Disease (leprosy), infectious

Hepatitis A

Hepatitis B

Hepatitis C

Infectious encephalitis

Lymphogranuloma Venereum

Meningococcus meningitis

Plague

Poliomyelitis

Psittacosis

Relapsing Fever

Ringworm of the scalp

Scarlet Fever

Streptococcal sore throat

Suspected smallpox

Suspected viral hemorrhagic fevers

(Lassa, Marburg, Ebola, Congo-Crimean, and other not yet isolated or named)

Trachoma

Typhoid Fever

Yellow Fever

Mental Health Screening

(Screening for known mental disorder or behavior associated with a mental health disorder)

Special Medical Requirements

(Necessary examinations and test to certify that IMS meets any special medical requirements listed In prerequisites of the courses IMS is scheduled To attend)

(Attach Special Medical Requirements)

¹³ Not required under the age of 15, provided that a tuberculin skin test shall be required if there is evidence of contact with a person known to have tuberculosis or other reason to suspect tuberculosis, and a chest X-ray examination shall be required in the event of a positive tuberculin reaction.

¹⁴ Not required under the age of 15 unless there is reason to suspect infection with syphilis or HIV.

IMMUNIZATIONS (Bring Immunization Record)

Required

Yellow Fever¹⁵

(If coming from or traveling through the countries of Angola, Benin, Bolivia, Brazil, Burkina Faso, Cameroon, Colombia, Democratic Republic of Congo, Colombia, Ecuador, French Guyana, Gabon, Gambia, Ghana, Guinea, Liberia, Nigeria, Peru, Sierra Leone, Sudan, and Venezuela.)

Required for Medical and Dental Training¹⁶

***Hepatitis B** (3 doses over 14 weeks)

***Measles/Mumps/Rubella** (one dose)

***Polio (OPV)** (4 doses over 14 weeks)

***Diphtheria, Pertussis & Tetanus (DPT)** (3 doses over 14 weeks)

Varicella (Chickenpox) (2 doses over 4 weeks)

Influenza (one dose)

(During influenza season October-March)

Tuberculosis (one dose)

Rabies (3 doses over 5 weeks)

(IMS participating in animal care training only)

***Required for enrollment in U.S. Public Schools**

The immunizations identified with asterisks plus Hepatitis A and a Mantoux test for tuberculosis are required for enrollment in U.S. Public Schools.

Dental Certification

IMS ONLY

Oral examination has been performed. No caries, infection or oral disease exists.

¹⁵ Information obtained from the CDC Travel Information Blue Sheet <http://www.cdc.gov/travel/blusheet.htm>

¹⁶ Recommended for all as a good health practice.